

TYMPANOPLASTY

Mississippi ENT Surgical Associates
(601) 709-7700

Stephen F. Lee, M.D.

A **tympanoplasty** is a surgery used to repair a collapsed eardrum. The hearing bones are sometimes repaired at the time of surgery if needed.

This surgery is usually done on an outpatient basis, which means you can go home the same day as surgery. While the patient is usually asleep, in some cases the patient can be done under local numbing medicine and sedation.

As with any surgery, there are associated risks and complications. Below are the risks and complications associated with ear surgery.

Bleeding- there is minimal blood loss in ear surgery. It is important to inform your doctor of all medications that cause blood not to clot, such as aspirin, ibuprofen, vitamin E and some heart medications.

Infection- drainage, swelling and pain may persist following surgery or may develop after surgery because of poor healing of the ear tissue. Appropriate antibiotics will be prescribed.

Facial nerve paralysis- temporary paralysis or weakness of one side of the face may occur as a result of an injury or swelling of the facial nerve. This usually resolves in a short period of time, but in rare cases it can be permanent.

Hearing loss- there is a 1-3% risk of having your hearing become worse or even deafness in the surgical ear.

Tinnitus- this is a ringing in the ear that can occur after a hearing loss.

Dizziness- this may occur following surgery because of irritation of the inner ear. Some unsteadiness is common for the first 3 days after surgery and may persist up to a week. In rare cases, this has been a permanent problem.

Meningitis- infection around the brain.

Cerebrospinal fluid leak- this is a rare complication that may need a second surgery to repair.

Change in taste or dry mouth- this is common for 6-8 weeks after surgery; this will usually go away on its own, but in rare cases can be permanent.

Death- this is a rare complication of any surgery.

Things to remember before surgery:

- Do not eat or drink after midnight on the night before your surgery.
- Do not take aspirin, ibuprofen or Vitamin E two weeks before surgery. You may take Tylenol.
- Have someone available to drive you home after surgery.

Care of the ear after surgery:

After surgery, a plastic cup will be placed over the ear. This cup can be removed the next day, but do not throw the cup away because it will need to be used at night for sleeping. When the cup is removed there will be bloody gauze inside the cup; throw this away. There will be a cotton ball over the ear canal; this stays in until the doctor removes it, about 2 weeks after surgery. If the sponge comes out, or sticks to the cotton ball and is pulled out, it will not need to be replaced, but keep a cotton ball over the ear canal and keep the ear dry. The stitches behind the ear can get wet one week after surgery. The inside of the ear will need to be kept dry for 4 weeks. It is normal for the ear to stick out; this will last until the swelling goes away. For two weeks you should avoid lifting more than 20 pounds or any activity that could cause your ear to be hit.

Reasons to call the clinic after surgery:

(601)709-7700

- increased pain, not controlled by pain medicine
- fever of 101.5 or greater
- large amounts of bleeding
- redness or drainage from the incision
- if you have questions